	HEDULE B (FEC Form 3)	Use separate schedule(s) for each category of the		FOR LINE NUMBER: PAGE 135 OF 136 (check only one)
TE	MIZED DISBURSEMENTS	Detailed Summar		17
	information copied from such Reports and Statements mor commercial purposes, other than using the name and a			
\	NAME OF COMMITTEE (In Full)  Friends of Jim Clyburn			
	Full Name (Last, First, Middle Initial) YWCA of the Upper Lowlands			Date of Disbursement
N	Mailing Address 2426 Church Street			08 18 2015
	Dity State Sumter SC	Zip Code 29150		Amount of Each Disbursement this Period
_	Purpose of Disbursement Donation-Sponsorship			300.00 Transaction ID : D529515
Ċ	Candidate Name		Category/ Type	
	Office Sought:  House Senate President  Disbursement For Other (s	General	,	
_	State: District:   Full Name (Last, First, Middle Initial)			
3.				Date of Disbursement
_	Mailing Address			
	City State Zip Code			Amount of Each Disbursement this Period
	Purpose of Disbursement  Candidate Name		Category/ Type	
	Office Sought:    House   Disbursement For     Senate   Primary     President   Other (s	General		
	Full Name (Last, First, Middle Initial)			
C				Date of Disbursement
N	Mailing Address			
	ity State Zip Code			Amount of Each Disbursement this Period
	Purpose of Disbursement			
	Candidate Name		Category/ Type	
(	Office Sought:  House Disbursement For Senate Primary President Other (s	General		
5	State: District:			
ÇI I	IRTOTAL of Dichurcements This Page (antional)	300.00		
SUBTOTAL of Disbursements This Page (optional)				
				199433.00

TOTAL This Period (last page this line number only).....